

RECEIVED

By Tracy Crews at 2:25 pm, Jan 27, 2023

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY**CMI INTOXILYZER 8000 MAINTENANCE REPORT**

REPORT #2

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-007511	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 10/13/2022	TIME OF INSPECTION 22:30
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
Air Blank	0.000	22:38	DRY	33321080A3	01/05/2024
Cal Check	0.080	22:38	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	22:39	N/A	N/A	N/A
Cal Check	0.080	22:39	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	22:40	0.080	CMI INC	
Cal Check	0.079	22:40	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	22:41	0.080		
Cal Check	0.079	22:41	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	22:41	0.080		
Cal Check	0.079	22:41	CALIBRATION CHECK RESULT 3		
Air Blank	0.000	22:41	0.079		
Pass			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	


DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	22:41
RAM Test	Pass		Subject Test	RFI*	22:42
EEPROM Checksum Test	Pass		Air Blank	0.000	22:42
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass				
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
Pass			Pass		

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT					
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19
0	0	0	0	0	3

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

TESTED & CERTIFIED

INSPECTING OFFICER

SIGNATURE 	PRINT NAME R. KAIGHEN
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TYPE II PERMIT NUMBER 210227	EXPIRATION DATE 10/06/2023	TELEPHONE NUMBER 8164828190
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7 Eastgate Dr. • P.O. Box 790 • Jacksonvllle, IL 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com

Certificate of Analysis

Certificate ID: 14496
Part #: BAC105L088T
Cylinder Size: 105L
Lot Number: 33321080A3
Expiration: 1/5/2024

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 105 Liters @ 1000 psig 70°F (21°C)

Component	Reported Concentration:	Analytical Accuracy (U, ±2):	Analytical Method:	Distributed by:
Ethanol	208 ppm	±0.002 BAC(672A1)	NDIR	CMI Inc.
Nitrogen	Balance	(5.2 ppm)		316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com

*Traceable to:
Certified Reference Material - 262.4 µmol/mol
Ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11

[Signature]
Specialty Gas Lab Tech

01-04-2022
Issuance Date



The calibration results shown on this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the item identified by the lot number and serial number shown on this certificate. The information on this certificate is for informational purposes only and does not constitute a warranty of any kind, express or implied. The information on this certificate is not to be used for any other purpose. The information on this certificate is not to be used for any other purpose. The information on this certificate is not to be used for any other purpose.

ISO/IEC 17025:2017 Accredited Laboratory



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

RYAN KAIGHEN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOXILYZER 8000

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 10/6/2021

NUMBER 210227

EXPIRES 10/6/2023

MO 580-0771 (6-10)

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LO#4 (RS-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The owner/credentialed is authorized to perform an instrument field service instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator: KAIGHEN, RYAN
Date Issued: 10/6/2021
Date Expires: 10/6/2023